

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			10/26
FORMALITY REVIEW	22	15353	12-20
RESPONSE FORMALITY REVIEW		7163	3/25/01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Estimate
 N Non-elected
 I Interference
 A Appeal
 O Other

Claim	Final	Original	Date
1			11/14/01
2			01/21/02
3			01/21/02
4			01/21/02
5			01/21/02
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Claim	Final	Original	Date
51			11/14/01
52			01/21/02
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Claim	Final	Original	Date
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149			01/21/02
150			01/21/02

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY

Claim		Date	
Final	Original		
85/51	1950/10		
86/52	11/9/31/9		
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Claim		Date	
Final	Original		
135/101	2/1/83		
136/102	1/8/19		
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Claim		Date	
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